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CONFIRMATION NO. 7588

SERIAL NUMBER 10/808,810	FILING OR 371(c) DATE 03/25/2004 RULE	CLASS 705	GROUP ART UNIT 3626	ATTORNEY DOCKET NO.
APPLICANTS Lewis Howard Wizig, Leawood, KS;				
** CONTINUING DATA ***** This application is a CON of 09/434,271 11/04/1999 PAT 6,735,569				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/07/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY KS	SHEETS DRAWING 66	TOTAL CLAIMS 1 INDEPENDENT CLAIMS 1
ADDRESS 54205				
TITLE METHOD AND SYSTEM FOR PROVIDING A USER-SELECTED HEALTHCARE SERVICES PACKAGE AND HEALTHCARE SERVICES PANEL CUSTOMIZED BASED ON A USER'S SELECTIONS				
FILING FEE RECEIVED 1756	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	